



## COUNTY OF LOUDOUN APPLICATION FOR EMPLOYMENT

Human Resources Division 1 Harrison Street, SE, 4th Floor, P.O. Box 7000 Leesburg, Virginia 20177  
(703) 777-0213 24 Hour Jobline: (703) 777-0536 FAX: (703) 771-5525 TDD: (703) 777-0107  
Web Site: [www.loudoun.gov](http://www.loudoun.gov) Email Address: [hr@loudoun.gov](mailto:hr@loudoun.gov)

**AN EQUAL OPPORTUNITY EMPLOYER:** Under the provisions of the Americans with Disability Act (ADA) reasonable accommodation will be made during the selection process for this job upon your request.

**INSTRUCTIONS:** Please print or type in black ink. If more space is needed attach a continuation sheet. YOU MUST COMPLETE EACH SECTION OF THIS APPLICATION

Recruitment #	Position for which you are applying	Department/Location
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NAME		
Last	First	Middle

ADDRESS			
Street	City	State	Zipcode

PHONE (H)	(W)
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Social Security #
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- For the purpose of compliance with the United States Immigration and Nationalization Act, and Section 40.1-11.1 of the Code of Virginia, are you legally eligible for employment in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Were you previously employed by Loudoun County Government? If so, please provide employment dates, position title and department \_\_\_\_\_
- Have you ever been convicted of a felony or misdemeanor, other than minor traffic violations?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, explain \_\_\_\_\_)
- Do you have a valid drivers license? Yes \_\_\_\_\_ No \_\_\_\_\_ Number/State/Expiration Date \_\_\_\_\_
- Have you ever been fired or resigned from a position after being notified you would be fired?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, explain) \_\_\_\_\_

	Name & Location	Date		Degree or # Of Credits Completed	Date Graduated	Major Area of Study
		From	To			
High School or Highest Grade Completed						
College or University						
Graduate School						
Business or Trade School						

If you expect to complete an educational program in the near future, please indicate what type of degree you are pursuing and when you expect to receive it: \_\_\_\_\_

List below present and past employment, beginning with the most recent. Include any related military service or related volunteer work. If appropriate, list number and title of employees you supervised in each position. You may attach a resume as supplemental information.

Name & Address of Employer	From Mo./Yr.	To Mo./Yr.	Starting Salary	Ending Salary	# of Hours per week	Reason for Leaving
	Position Title:					
	Description of work:					
Supervisor's Name/Telephone						

  

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	Position Title:					
	Description of work:					
Supervisor's Name/Telephone						

Awards or Certifications: \_\_\_\_\_ Languages: \_\_\_\_\_

Special Skills & Abilities (including computer skills) \_\_\_\_\_

<p>1) I certify that the statements in this application are true and complete to the best of my knowledge, and I agree that any intentional misstatement or omission will constitute grounds for unfavorable consideration of my application or dismissal from employment with the County of Loudoun.</p> <p>2) I authorize the County of Loudoun to obtain information from past employers and other sources to support the data on this application, including a review of my educational, criminal and credit records, as appropriate.</p> <p>3) <b>You may contact my PRESENT employer Yes__ No__ (If no, explain)</b> _____</p> <p>_____</p> <p>APPLICANT'S SIGNATURE _____ DATE _____</p>
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-----DO NOT REMOVE-----  
**COMPLETION OF THE FOLLOWING INFORMATION IS VOLUNTARY**

The following EEO information is collected in order to meet the reporting requirements set forth by federal regulations. This information will NOT be used in making employment decisions and will NOT be kept with your application for employment.

Check all appropriate categories:

- |                                 |   |
|---------------------------------|---|
| <input type="checkbox"/> Male   | <input type="checkbox"/> American Indian (includes Alaskans)  |
| <input type="checkbox"/> Female | <input type="checkbox"/> Asian & Asian American (includes Pakistanis, Indians, or Pacific Islanders)                                  |
|                                 | <input type="checkbox"/> Black (includes Jamaicans, Bahamians & other Caribbean or Africans but not Hispanic or Arabian descent)      |
|                                 | <input type="checkbox"/> Hispanic (includes persons of Mexican, Puerto Rican, Central or South American or Spanish origin or culture) |
|                                 | <input type="checkbox"/> White (includes Arabian)   |

Position applied for \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**PLEASE ANSWER RECRUITMENT QUESTIONS BELOW**

How did you first learn about this position?

- |  |   |   |   |
|--|---|---|---|
| County Website [ <input type="checkbox"/> ]            | Loudoun Times-Mirror [ <input type="checkbox"/> ] | Weekly Job Announcements [ <input type="checkbox"/> ] |   |
| Professional Publications [ <input type="checkbox"/> ] | Washington Post [ <input type="checkbox"/> ]      | Other Web sites [ <input type="checkbox"/> ]          | County Employee (referral) [ <input type="checkbox"/> ] |
| Other Sources _____                                    |   | Job Fair [ <input type="checkbox"/> ]                 |   |

## Continuation of Employment:

Name & Address of Employer	From Mo./Yr.	To Mo./Yr.	Starting Salary	Ending Salary	# of hrs per week	Reason for Leaving
	Position Title:					
	Description of work:					
Supervisor's Name/Telephone						
Name & Address of Employer	From Mo./Yr.	To Mo./Yr.	Starting Salary	Ending Salary	# of hrs per week	Reason for Leaving
	Position Title:					
	Description of work:					
Supervisor's Name/Telephone						
Name & Address of Employer	From Mo./Yr.	To Mo./Yr.	Starting Salary	Ending Salary	# of hrs per week	Reason for Leaving
	Position Title:					
	Description of work:					
Supervisor's Name/Telephone						

Print Name: \_\_\_\_\_ Social Sec. No. \_\_\_\_\_ Recruitment No. \_\_\_\_\_